

EXHIBIT 117

1 UNITED STATES DISTRICT COURT
2 FOR THE NORTHERN DISTRICT OF OHIO
3 EASTERN DIVISION

4 - - -

5 IN RE: NATIONAL PRESCRIPTION
6 OPIATE LITIGATION

Case No.

7 1:17-MD-2804

8 APPLIES TO ALL CASES

Hon. Dan A.

9 Polster

10 Case No. 1:17-MD-2804

11 - - -

12 March 21, 2019

13 - - -

14 HIGHLY CONFIDENTIAL - SUBJECT TO FURTHER
15 CONFIDENTIALITY REVIEW

16 Videotaped deposition of PAUL
17 CAMPANELLI, held at 250 West 55th Street,
18 New York, New York, commencing at 9:10 a.m.,
19 on the above date, before Marie Foley, a
20 Registered Merit Reporter, Certified
21 Realtime Reporter and Notary Public.

22 GOLKOW LITIGATION SERVICES

23 877.370.3377 ph | 917.591.5672 fax

24 Deps@golkow.com

1 PAUL CAMPANELLI, the Witness herein,
2 having been first duly sworn by a
3 Notary Public in and of the State of
4 New York, was examined and testified as
5 follows:

6 EXAMINATION BY

7 MR. BUCHANAN:

8 Q. Good morning, Mr. Campanelli.

9 My name is Dave Buchanan.

10 Could you please state your name
11 for the record, sir?

12 A. It's Paul Campanelli.

13 Q. And, are you the current chief
14 executive officer of Endo?

15 A. Yes.

16 Q. You're also a board member of
17 Endo.

18 Is that right?

19 A. Yes.

20 Q. Okay. Just so you understand
21 where I come from on this, I and others
22 working with us represent cities,
23 municipalities, counties who've been
24 impacted by the opioid epidemic. They've

1 brought claims against you and other
2 entities.

3 Do you have some general sense
4 of that litigation, the opioid litigation
5 by municipalities, counties, cities?

6 A. Yes.

7 MR. BUCHANAN: Okay. Can we go
8 off the record for a moment?

9 THE VIDEOGRAPHER: The time is
10 9:11 a.m.

11 Off the record.

12 (Discussion held off the record.)

13 THE VIDEOGRAPHER: We are back
14 on the record.

15 The time is 9:12 a.m.

16 BY MR. BUCHANAN:

17 Q. I apologize for that
18 interruption, sir.

19 Just to restate where we were,
20 you are the current CEO of Endo.

21 Is that right?

22 A. Correct.

23 Q. You're board member of Endo?

24 A. Correct.

1 Q. I take it you're a shareholder
2 of Endo?

3 A. Yes.

4 Q. Okay. As the CEO, that means
5 chief executive officer?

6 A. Yes.

7 Q. You are the senior-most officer
8 of the company?

9 A. Yes.

10 Q. As a board member, you're on the
11 board of directors of the company?

12 A. Correct.

13 Q. Board of directors is the group
14 that's appointed by the shareholders to
15 oversee the operations of the company,
16 correct?

17 A. To govern the company, yes.

18 Q. To govern the company, thank
19 you.

20 The board and its senior
21 officers are charged with returning value
22 and profits to shareholders, right?

23 A. Yes.

24 Q. Shareholders own the company,

1 right?

2 A. Yes.

3 Q. And you work for the
4 shareholders to make money for the
5 shareholders?

6 A. Yes.

7 Q. Thank you.

8 What I'd like to do, because
9 there's been some different acquisitions
10 and some different names, I want to see if
11 we can orient ourselves from the various
12 entities and get some common knowledge and
13 dates down. We have a slide that
14 hopefully will simplify this.

15 MR. BUCHANAN: Could we get
16 slide 2 over to counsel?

17 And what's that going to be
18 marked as an exhibit?

19 This is Exhibit 201.

20 (Campanelli Exhibit 201,
21 document, was marked for
22 identification, as of this date.)

23 MR. BUCHANAN: My intent,
24 counsel, is to mark demonstratives

1 from 200 up. With regard to
2 substantive exhibits, they'll be in
3 the first range of 100. We may not
4 mark them all.

5 BY MR. BUCHANAN:

6 Q. Showing you what's marked as
7 201, sir, it's a timeline of the Endo
8 corporate history.

9 You see off in the left, Endo
10 Pharmaceuticals actually goes back, well,
11 a long time, right? Back to the 1920s?

12 MR. STERN: Objection; lack of
13 foundation.

14 A. This is back in the DuPont Merck
15 days.

16 Q. This actually even precedes the
17 DuPont Merck days, correct, sir?

18 A. Yes, correct.

19 Q. You see the far left column Endo
20 Pharmaceuticals formed in 1920?

21 A. Yes.

22 Q. And that's a history that you've
23 referenced in annual reports and
24 shareholder reports over the years, that

1 this is a company that goes back to the
2 1920s.

3 Correct, sir?

4 MR. STERN: Objection; lack of
5 foundation.

6 A. To the best of my knowledge,
7 that -- that is part of the original
8 predating DuPont Merck.

9 So, while in name, yes. I don't
10 believe the company actually started until
11 about 1997.

12 Q. Okay. And, what you're alluding
13 to, sir, is that at some point in time,
14 the timeline indicates 1970, but without
15 regard to whether it was 1970 or '71 or
16 '69, DuPont acquired Endo, correct?

17 A. That's what it says here.

18 Q. Okay. And then ultimately there
19 was a join venture between DuPont and
20 Merck to focus on pharmaceuticals,
21 correct?

22 A. I -- I'm not sure of the case
23 there.

24 Q. Okay. Then in the late '90s,

1 1997 or so, some executives of what was
2 then operating as the DuPont Merck joint
3 venture essentially spun off the Endo
4 portfolio and established a new company
5 called Endo Pharmaceuticals.

6 Correct, sir?

7 A. I think what happened was a
8 group of individuals were given an
9 opportunity to acquire a series of
10 products and acquired the name Endo back
11 in 1970.

12 Q. Understood.

13 So whatever the corporate
14 transactional structure were, some
15 products that were currently being
16 promoted, manufactured, et cetera, by the
17 Merck DuPont joint venture were sold by
18 the DuPont Merck joint venture together
19 with the name Endo and a new company was
20 formed, correct?

21 MR. STERN: I apologize,
22 Mr. Buchanan. You're talking about
23 1970 now?

24 MR. BUCHANAN: I was, yes.

1 A. I think that's right. That
2 three individuals bought a handful of
3 products and bought the name Endo back in
4 1997.

5 Q. Okay. And the CEO for that
6 reformed Endo Pharmaceuticals in 1997 was
7 whom?

8 A. I believe it was Carol Ammons.
9 I believe that's her name.

10 Q. Okay. And then the company
11 operated for a number of years privately
12 and then ultimately went public and gained
13 public shareholders in 2000, right?

14 A. I -- I'm not sure of the date.
15 I see it here on the sheet. So
16 I have no reason not to believe it.

17 Q. And I don't think that's going
18 to be a material point for us today. I
19 just wanted to make sure we were oriented
20 here.

21 In 2010, we see an acquisition
22 of a then large generic pharmaceutical
23 company, correct?

24 A. They acquired Qualitest, yes, a

1 generics company.

2 Q. And 2010 is consistent with your
3 recollection, sir, of when that occurred?

4 A. Yes.

5 Q. Then we could probably skip over
6 2014 which references an Irish inversion.

7 Something I assume done for tax
8 returns and other reasons, right?

9 A. Yes.

10 Q. Okay. And Endo is the U.S.
11 subsidiary going forward from that point
12 in time.

13 And then Endo acquired Par,
14 correct?

15 A. Endo acquired Par in 2015.

16 Q. Okay. And so we have,
17 essentially, three pharmaceutical
18 companies that had their own portfolios.

19 If we look in the post-1997 era,
20 we've got Endo with a portfolio of
21 products it brought from DuPont Merck,
22 correct?

23 A. Yes.

24 Q. We've got Qualitest

1 Pharmaceuticals with its portfolio of
2 generics products, correct?

3 A. Yes.

4 Q. And we have Par with its
5 portfolio of products that were acquired
6 by Endo in 2015, correct?

7 A. Correct.

8 Q. And it looks like as a business
9 matter, after that merger or acquisition
10 in 2015, generic products, meaning
11 non-branded pharmaceutical products, were
12 consolidated in the Par brand, right?

13 MR. STERN: Objection to the
14 form.

15 A. In 2015 when Endo acquired Par,
16 the Qualitest portfolio fell under to the
17 Par portfolio in name and then was
18 governed under Endo.

19 Q. And just to make sure we have
20 context in how you come to this, sir, you
21 came into the Endo entities through the
22 acquisition of Par in 2015?

23 A. Correct.

24 Q. Okay. And, so, let's dial back

1 the clock and make sure we understand kind
2 of your role and involvement in the
3 pharmaceutical industry.

4 You were with Par from, what,
5 roughly 2000, 2001?

6 A. 2001.

7 Q. Okay. And moved through various
8 positions though.

9 Ultimately, you reached the CEO
10 position at Par, correct?

11 A. Started in business development
12 and concluded as the CEO.

13 Q. And you were the CEO from, what,
14 2010 or so?

15 A. No. I was the CEO from 2012 to
16 2015.

17 Q. And, during your time at Par,
18 Par was also in the opioid business,
19 right?

20 A. We had a small portfolio, yes.

21 Q. And, at the time when Endo
22 acquired Par it was in the opioid business
23 still at that point, correct?

24 MR. STERN: Objection to form.

1 A. I'm sorry. Could you repeat
2 that?

3 Q. In 2015 when Endo acquired Par,
4 it was making opioid products for sale,
5 correct?

6 A. Par?

7 Q. Par.

8 A. Yes.

9 Q. I see the confusion with my
10 question.

11 In 2015 when Endo acquired Par,
12 Par was still in the business of making
13 opioid products, correct, sir?

14 MR. STERN: Object to the form.

15 A. Par was manufacturing and either
16 would have acquired and distributed
17 opioids from third parties.

18 Q. Okay. At the point in time in
19 2010 when Endo acquired Qualitest,
20 Qualitest, which you indicated was a
21 generic manufacturer of drugs, they also
22 had a portfolio of opioid products they
23 were manufacturing and distributing,
24 correct?

1 A. That's my general understanding.

2 Q. As of the time you became CEO of
3 Endo, the Endo company prior to the merger
4 was substantially invested in the pain
5 segment.

6 Fair?

7 A. I'm a little confused with your
8 question. I'm sorry. Could you just
9 re --

10 Q. No, no, that's fine. And please
11 do that throughout the day if, for
12 whatever reason, we're not communicating
13 clearly or my questions aren't clear.

14 Prior to the acquisition of the
15 Par assets in 2015, I mean, you were a
16 part of that discussion and negotiation
17 back and forth with Endo?

18 A. For the acquisition of Par, yes.

19 Q. Yes.

20 And Endo ultimately paid, what,
21 8 billion dollars to acquire the Par
22 assets?

23 A. Correct.

24 Q. And if I understand correctly,

1 sir, the Par assets had sold for 2 billion
2 dollars just a few years before that,
3 right?

4 A. 2.2 billion dollars.

5 Q. So roughly a fourfold return for
6 the company, its shareholders, when it
7 sold in 2015?

8 A. Generally, yes.

9 MR. STERN: Objection to the
10 form.

11 BY MR. BUCHANAN:

12 Q. Okay. At the point in time when
13 you were having this discussion with Endo
14 in 2015 about selling Par, becoming
15 involved in Endo, Endo was in the pain
16 business at that point in time, right?

17 A. It had a portfolio of products
18 that were detailed into pain, yes, amongst
19 others.

20 Q. Endo was essentially known as a
21 pain management company, correct?

22 A. In 2015?

23 2015 I think it was
24 transitioning to a specialty company.

1 Q. You recognize historically, sir,
2 that Endo was a pain management company,
3 if we go back to the '90s, early 2000s,
4 2010.

5 Fair?

6 A. Yes.

7 Q. Okay. And its portfolio of
8 products in pain management significantly
9 included opioid products, true?

10 MR. STERN: Objection to the
11 form.

12 A. My understanding was there was a
13 couple of opioid products in the
14 portfolio.

15 Q. Okay. Well, let's see if we can
16 orient ourselves more specifically. We're
17 talking about opioid products today.
18 That's, essentially, the subject of the
19 case, for reasons we'll get into.

20 You have an understanding of
21 really in some sense what opioid products
22 do?

23 A. Generally, yes.

24 Q. Okay. They bind to receptors in

1 the brain, among other things, right?

2 MR. STERN: Objection to the
3 form.

4 A. Sounds reasonable.

5 Q. Okay. They can trigger a series
6 of reactions in the body that can release
7 feelings of pleasure, euphoria, suppress
8 anxiety.

9 Fair?

10 MR. STERN: Objection to the
11 form.

12 A. These areas I really don't know.

13 Q. Okay. Do you have some general
14 sense, sir, that they can lead to a
15 subjective feeling of pleasure and
16 euphoria?

17 A. Generally.

18 Q. Okay. And that's not something
19 that's really new or unique in the
20 portfolio of products that Endo brought
21 out in 1997, right?

22 MR. STERN: Objection to the
23 form.

24 A. I'm not sure I follow your

1 question.

2 Q. I mean, I guess where I was
3 going is that's just the characteristic of
4 opioids, right?

5 MR. STERN: Objection to the
6 form.

7 A. I really don't know the -- the
8 specificity of the characteristics. I
9 just don't, really.

10 Q. Do you have some understanding,
11 sir, more broadly that, I mean, opioids go
12 back thousands of years.

13 Fair?

14 A. Fair.

15 Q. Obviously not in tablet form.
16 In different forms, but derived from the
17 opium poppy?

18 A. Understood.

19 Q. Over time, scientists figured
20 out how to synthesize those into either
21 drugs for pleasure or drugs for treatment?

22 MR. STERN: Objection to the
23 form.

24

1 BY MR. BUCHANAN:

2 Q. Right?

3 A. I don't know about drugs for
4 pleasure.

5 I know that drugs were focused
6 on for pain.

7 Q. Well, I mean, you've heard of
8 opium dens, sir?

9 A. Yes.

10 Q. And I just want to orient
11 ourselves.

12 I mean, this class of drugs that
13 kind of brings us in this room today had
14 predecessor compounds going back thousands
15 of years that had been the subject of
16 abuse and use, right?

17 A. I understand abuse and misuse of
18 opioids, generally speaking, yes.

19 Q. Okay. And really this isn't the
20 first time we've had to deal with issues
21 of opioid abuse, even opioid epidemics?

22 MR. STERN: Objection to the
23 form.

24 A. Again, I'm not -- I'm not sure

1 specifically.

2 Q. I just want to have an
3 understanding, even generally, sir. I
4 mean, as the CEO of a company that still
5 has a portfolio of opioid products, I
6 mean, you do have some understanding that
7 there is a history with opioid products
8 and abuse and addiction, being diverted.

9 Fair?

10 MR. STERN: Objection to the
11 form.

12 A. As a CEO, I am aware of abuse
13 and misuse of opioids over time.

14 Q. But that's something that you
15 didn't have to wait until 2010 to find
16 out, right?

17 A. Me personally?

18 Q. Yeah.

19 A. Generally -- general
20 understanding, it would have been in -- in
21 probably the 2015 time frame that it
22 really became an awareness for me.

23 Q. Okay. We'll see if we can pin
24 that down as we move throughout the day,

1 sir.

2 I mean, just as a person growing
3 up over the last 50 or so years, you have
4 an awareness that drugs, whether it's
5 Morphine, whether it's OxyContin, whether
6 it's heroin, are highly sought and highly
7 abused.

8 Fair?

9 MR. STERN: Objection to the
10 form.

11 A. I am aware that these type of
12 drugs can be abused and misused, yes.

13 Q. And that awareness, sir, you had
14 that prior to 2015?

15 A. Fair, yes.

16 Q. Okay. Well, let's see if we can
17 maybe using this chart as a reference
18 point, see if we can see where the
19 company's various products fit in, if we
20 could.

21 MR. BUCHANAN: Corey, could I
22 have slide 20 up on the screen?

23 I'll pass one over to counsel.
24 What exhibit number will this

1 be?

2 I'm going to pass you Exhibit
3 202, a copy for the witness and
4 counsel.

5 MR. STERN: Thank you.

6 (Campanelli Exhibit 202,
7 document, was marked for
8 identification, as of this date.)

9 BY MR. BUCHANAN:

10 Q. Sir, I'll represent to you that
11 in the course of litigation, what happens
12 is we exchange information with each
13 other. You'll give us a bunch of
14 documents. We'll give you documents and
15 both sides will try and sift through that
16 and see what the state of play is.

17 From records produced through
18 Endo over the years, we have an
19 understanding that Endo made various
20 oxycodone products.

21 Do you have that awareness, sir?

22 A. Yes.

23 Q. Okay. And on the left-hand
24 column we see several different, if you

1 will, formulations of those products
2 together with brand names that were used
3 from time to time.

4 Do you see those?

5 A. Yes.

6 Q. Percocet, that's your brand,
7 right?

8 A. Correct.

9 Q. Percocet's been a brand of the
10 company since the '70s, correct?

11 A. I know it's been approved for
12 many years. I'm not sure about the
13 specific date.

14 Q. Okay. And Percocet contains
15 oxycodone as its active pharmaceutical
16 ingredient, correct?

17 A. I believe that's one of them.

18 Q. What is the active
19 pharmaceutical ingredient, sir, in
20 OxyContin?

21 A. Oxycodone.

22 Q. Okay. And, so, we see that the
23 company here, Endo, is a manufacturer of
24 Percocet, an oxycodone product, as well as

1 another product called Endocet.

2 Do you see that?

3 A. Yes.

4 Q. Do you recognize that, sir, as
5 the generic formulation of the company's
6 Percocet product?

7 A. Yes.

8 Q. And for years, sir, the company
9 made, marketed and sold Endocet, correct?

10 A. Yes.

11 MR. STERN: Objection to the
12 form; lack of foundation.

13 BY MR. BUCHANAN:

14 Q. Endocet and Percocet. There's
15 also a reference to Percodan and Endodan.

16 Percodan is also your brand,
17 right?

18 MR. STERN: Object to the form.

19 A. I'm not familiar with it. I see
20 it on the sheet here.

21 Q. Okay. Do you recognize that,
22 sir, as the combination of oxycodone and
23 aspirin?

24 A. I'm not familiar with the drugs.

1 Q. Okay. I take it you wouldn't
2 dispute if we had records from -- from
3 your company that said you sold a bunch of
4 Percodan and Endodan that you actually did
5 so?

6 MR. STERN: Objection to the
7 form.

8 A. I -- I don't know, but I
9 wouldn't have any reason to dispute it.

10 Q. Fair enough.
11 There's a reference to oxycodone
12 ER.

13 Do you see that?

14 A. Yes.

15 Q. That's the generic formulation
16 of a brand product, right, sir?

17 A. Yes.

18 Q. And please tell the jury what
19 the brand name of that product is.

20 A. OxyContin extended-release.

21 Q. And you sold a bunch of those
22 pills?

23 MR. STERN: Objection to the
24 form.

1 BY MR. BUCHANAN:

2 Q. Right?

3 A. We sold -- we sold the product.

4 Q. And we're going to talk about
5 volume at some point today.

6 I mean, at what point is it a
7 lot of product, sir? I mean, are billions
8 of pills a lot of product?

9 MR. STERN: Objection to the
10 form.

11 A. I never thought about it in
12 terms of what a lot is. It's usually
13 based upon what the wholesalers' purchase
14 orders are.

15 Q. Right.

16 Would you be surprised to learn,
17 sir, that you sold billions of
18 oxycodone-containing products?

19 MR. STERN: Objection to the
20 form.

21 A. Again, if that was based upon a
22 purchase order, it would not surprise me.

23 Q. Okay. We'll have a chance,
24 hopefully, to look at that today.

1 And then we see Percolone and
2 Endocodone as two additional formulations
3 of oxycodone-containing products.

4 Do you see those?

5 A. I see the names.

6 Q. You're aware, sir, that
7 oxycodone products were target of abuse
8 and diversion in the market.

9 Fair?

10 MR. STERN: Objection to the
11 form.

12 A. I'm sorry. Could you say that
13 again?

14 Q. You're aware that
15 oxycodone-containing products were a
16 target of abuse and diversion in the
17 market?

18 MR. STERN: Objection to the
19 form.

20 A. I'm aware that it's -- it's
21 abused and misused.

22 Q. Okay. Let's look at the next
23 column, sir. And I didn't go into each of
24 the -- staying in the left column for a

1 moment, the oxycodone column.

2 You made a number of different
3 formulations in each of those products.
4 Well, not for all of them, but for some of
5 them.

6 Fair?

7 MR. STERN: Objection to the
8 form.

9 A. Again, I'm personally
10 familiar -- familiar with about three of
11 these products. I -- I'm not familiar
12 with every product on this sheet here in
13 the left column.

14 Q. I take it some of these products
15 were more popular than others?

16 MR. STERN: Objection to the
17 form.

18 A. I don't know if they were
19 popular or not. I'm just not familiar
20 with their names.

21 Q. Okay. Well, some of these were
22 bigger sellers than others?

23 A. I'm familiar with Endocet. I'm
24 familiar with oxycodone ER and I'm

1 familiar with Percocet.

2 Q. Okay. Let's move forward now to
3 hydrocodone.

4 Company made a number of
5 hydrocodone-containing products, correct?

6 A. I'm familiar with one product in
7 this column here, the Hydro/APAP.

8 Q. And hydrocodone/APAP if we were
9 trying to link that with a brand name,
10 that would be Vicodin, right?

11 A. That's my understanding.

12 Q. So in the oxycodone column we
13 have you all making Percocet and the
14 generic form of OxyContin as kind of
15 common trade names, right?

16 MR. STERN: Objection to the
17 form.

18 A. I'm sorry. Could you say that
19 one more time?

20 Q. Yeah.

21 In the oxycodone column, just so
22 we can kind of link this up with some
23 branded names to the extent that they're
24 not branded names, we have you making

1 disagree, sir, that Endo actually made
2 morphine sulphate over the years, ER?

3 A. I can't dispute that.

4 Q. Okay. Let's go one further
5 notch to the right. Oxymorphone.

6 These were some big products for
7 the company, right?

8 A. These were products which were
9 distributed by Endo, yes.

10 Q. Marketed, promoted, distributed,
11 sold.

12 Fair?

13 A. Correct.

14 Q. We've got Opana, Opana ER and
15 Opana ER reformulated, correct?

16 A. Yes.

17 Q. And then we have another product
18 off to the right hydromorphone.

19 Do you see that?

20 A. Yes.

21 Q. And, are you familiar, sir, with
22 the concept of MMEs, Morphine equivalents?

23 A. Yes.

24 Q. There's different potencies of

1 the various opioids with regard to the
2 effects on the various receptors in the
3 brain.

4 Fair?

5 A. I don't know that.

6 Q. You're familiar, sir, that
7 certain products --

8 MR. BUCHANAN: Withdrawn.

9 Q. Within your business, sir,
10 certainly within the way these products
11 are promoted, a consideration that's to be
12 given with regard to dosing is how much
13 stronger in terms of potency the drug is
14 gram-for-gram relevant to Morphine.

15 Correct?

16 MR. STERN: Objection to the
17 form.

18 A. I know that MMEs are based on
19 the milligram equivalents.

20 Q. Okay. So, for example, one
21 milligram of Morphine -- excuse me.
22 Probably easier to go this direction.

23 MR. BUCHANAN: Withdrawn.

24 Q. One milligram of oxymorphone,

1 your Opana products, is equivalent to
2 three milligrams of Morphine, right?

3 A. That -- that appears correct.

4 Q. Okay. Three-to-one --

5 A. Correct.

6 Q. -- is the MME conversion, right?

7 And with regard to your
8 oxycodone products and Morphine, that's,
9 what, one-and-a-half-to-one?

10 MR. STERN: Objection to the
11 form.

12 A. Yes.

13 Q. And, so, essentially what that
14 means, sir, is that if we're looking at a
15 30 milligram Opana tablet, 30 milligram
16 Opana tablet --

17 MR. BUCHANAN: Withdrawn.

18 MR. STERN: Here comes the math.

19 MR. BUCHANAN: Thank you.

20 That's why I went to law school.

21 Withdrawn.

22 Q. If we look at a 30 milligram
23 Opana tablet or any of the oxymorphone
24 tablets there, that translates into

1 roughly 90 milligrams of Morphine, right?

2 A. Three-to-one.

3 Q. Three times 30, I think I can do
4 that without my calculator. That's 90
5 milligrams. All right.

6 Okay. So, these are the Endo
7 products, sir.

8 Let me pass you over Qualitest's
9 products.

10 (Campanelli Exhibit 203,
11 document, was marked for
12 identification, as of this date.)

13 BY MR. BUCHANAN:

14 Q. We talked a moment ago, sir,
15 about Qualitest's role and involvement
16 with regard to opioids and its
17 relationship with Endo.

18 Passing you what we're marking
19 as Exhibit 203. Just let me know when you
20 have that, sir.

21 (Pause.)

22 Q. Sir, I'll represent to you that
23 this is just a graphic reflecting the
24 various products that have been identified

1 in the order records from Qualitest over
2 the years.

3 We see, again, three columns.
4 And we're having some difficulty, I think,
5 showing the heading on the screen. It's
6 kind of blacked out right now.

7 But on your printout, you can
8 see the headings, correct, sir?

9 A. Yes.

10 MR. STERN: I'm sorry,
11 Mr. Buchanan. By headings do you mean
12 hydrocodone, oxycodone and
13 oxymorphone?

14 MR. BUCHANAN: I did. Thanks
15 for the clarification, counsel.

16 BY MR. BUCHANAN:

17 Q. So, the heading at the top of
18 Exhibit 203 says "Qualitest opioid drugs,"
19 correct?

20 A. Yes.

21 Q. On the left-hand side we have
22 hydrocodone.

23 Do you see that?

24 A. Yes.

1 Q. In the middle we have oxycodone,
2 right?

3 A. Yes.

4 Q. And to the far right we have
5 oxymorphone?

6 A. Yes.

7 Q. Okay. And do you have the
8 knowledge, sir, that in fact Qualitest was
9 in the business of making, selling and
10 distributing hydrocodone opioid products?

11 MR. STERN: Objection; lack of
12 foundation. Objection to the form.

13 BY MR. BUCHANAN:

14 Q. You can answer.

15 A. I'm aware that Qualitest
16 manufactured hydrocodone.

17 Q. Okay. And we talk hydrocodone
18 products, we're talking about
19 hydrocodone/APAP, that's that Vicodin
20 tablet, right? Or the brand?

21 A. That's my understanding. Okay.

22 Q. And we go to the middle column
23 here and we see oxycodone again and we
24 have oxycodone APAP at the bottom.

1 I think you told us a few
2 minutes ago oxycodone APAP would be the
3 Endo-branded product Percocet, right?

4 A. Correct.

5 Q. And then we have other oxycodone
6 tablets which if they were ER would be
7 OxyContin, right?

8 A. If they were ER.

9 Q. And if you just sold them plain,
10 it would just be OxyContin, right?

11 MR. STERN: Objection to the
12 form.

13 BY MR. BUCHANAN:

14 Q. IR?

15 A. IR here is an immediate release
16 product.

17 Q. Thank you.

18 Then on the right we have
19 oxymorphone, that's the active ingredient
20 in that drug that you marketed under the
21 brand name Opana, correct?

22 MR. STERN: Objection to the
23 form.

24 A. Oxymorphone here is a generic

1 version of Opana IR.

2 Q. And we're already using terms
3 that may not be clear. I guess IR is
4 immediate release?

5 A. Correct.

6 Q. ER is extended-release?

7 A. Correct.

8 Q. Okay. So when we talk about
9 oxycodone ER, which I think you said was
10 OxyContin, that's oxycodone
11 extended-release, right?

12 A. Yes.

13 Q. If you're talking oxycodone IR,
14 that's the active ingredient in OxyContin
15 but for immediate-release?

16 A. Yes.

17 Q. Thank you. All right.

18 Let's go forward to the next
19 one. Some Par products.

20 Can we pass over, please,
21 Exhibit 204?

22 (Campanelli Exhibit 204,
23 document, was marked for
24 identification, as of this date.)

1 BY MR. BUCHANAN:

2 Q. I think you told us, sir, that
3 you were the CEO of Par from 2012 to 2015,
4 correct?

5 A. Correct.

6 Q. And you worked there, I think,
7 from, what, 2000 to 2012 in various roles
8 as you escalated through the management
9 ranks, right?

10 A. Yes, from 2001 through 2015.

11 Q. Okay. Let's just kind of get in
12 context, if you will, where Par was in the
13 mix, okay.

14 Par made fentanyl products,
15 right?

16 A. No.

17 Q. No, sir?

18 A. No.

19 Q. We have shipping records that
20 reflect that you were selling fentanyl.

21 A. Par sold fentanyl.

22 Q. Fair enough.

23 So the fuss or the disagreement
24 was "make" versus "sold"?

1 MR. STERN: Objection to the
2 form.

3 A. Correct.

4 Q. And help me out, sir.

5 You didn't make, but you
6 acquired it?

7 A. Correct.

8 Q. And then sold it?

9 A. Yes.

10 Q. Does that mean you had a
11 contract manufacturer?

12 A. Yes.

13 Q. For each of these columns here
14 in the chart, and I probably should have
15 oriented us a little bit, these are Par
16 opioid drugs as we've identified from, if
17 you will, the order records that Par has
18 provided to us.

19 Fair?

20 MR. STERN: Objection to the
21 form.

22 BY MR. BUCHANAN:

23 Q. I'll tell you that. That's my
24 representation.

1 Do you recollect, sir, selling
2 fentanyl-containing products while at Par?

3 MR. STERN: Objection to the
4 form.

5 A. Par sold two forms of fentanyl
6 products.

7 Q. Okay. They sold fentanyl
8 citrate?

9 A. Yes.

10 Q. And that's the lozenge or
11 lollipop?

12 A. Correct.

13 Q. You also sold fentanyl patch?

14 A. We sold fentanyl patch for a
15 period of time.

16 Q. Okay. You also sold Morphine,
17 right?

18 MR. STERN: Objection to the
19 form.

20 A. We sold Morphine.

21 Q. Okay. Same qualification that
22 you provided with regard to fentanyl, sir.
23 That you sold it but didn't make it?

24 MR. STERN: Objection to the

1 And they're a little off, I guess.

2 There we go.

3 BY MR. BUCHANAN:

4 Q. So, you can see, sir, Endocet
5 total sales of this Percocet generic
6 formulation over the years roughly 4.2
7 billion pills.

8 You see that, sir?

9 MR. STERN: Objection to the
10 form.

11 A. No. No, I don't see that.

12 Q. If you go to the far right
13 column total pills sold over the course of
14 the period of time?

15 A. You -- your question flipped on
16 me, just so you know.

17 Q. Fair enough. Sorry about that.

18 Do you understand my question
19 now to be referring to total sales of
20 Endocet between the period of time they
21 started selling it until they stopped
22 would be about 4.2 billion Endocets?

23 A. I think you need to clarify your
24 question, sir.

1 Q. And, what's confusing about it,
2 or what's tripping us up?

3 A. Are you saying sales or units,
4 sir?

5 Q. I'm sorry. Sales of those
6 units.

7 These are, in fact, the units
8 that have been represented as sold to us.

9 A. Okay.

10 MR. STERN: Not dollars, is the
11 point.

12 MR. BUCHANAN: Fair.

13 MR. STERN: Right.

14 MR. BUCHANAN: Fair.

15 BY MR. BUCHANAN:

16 Q. And I'm -- you sold this volume
17 of pills, sir?

18 A. This sheet indicates that we've
19 sold these unit -- extended units of these
20 pills.

21 Q. Fair enough. Thank you.

22 Yeah, I did not mean to suggest
23 that these are dollars. There's a legend
24 at the top that I think reflects extended

1 units. That's what we're talking about
2 with these numbers.

3 A. Okay.

4 Q. Okay. And we're looking at just
5 the Endo numbers in this chart, I'll
6 represent to you, sir. Okay.

7 MR. STERN: Objection to the
8 form.

9 BY MR. BUCHANAN:

10 Q. So, we see roughly 4.2 billion
11 Endocet units, that's pills, over the time
12 that Endo provided us data from '99 to
13 present, right?

14 A. 4.2 billion extended units.

15 Q. For Percocet we see, as the
16 brand, Endo's brand, we see some 1.6
17 billion extended units, correct?

18 A. Correct.

19 Q. All right. So, those two
20 oxycodone acetaminophen combinations
21 represent almost, what, 6 billion pills
22 sold by Endo for that controlled
23 substance.

24 Is that right?

1 A. About 5.6, 5.7 billion units,
2 yes.

3 Q. Yeah, 5.8 even?

4 A. Okay.

5 Q. There's another line in there
6 oxycodone APAP, I guess they sold a
7 different formulation of Percocet there,
8 right? Or another -- another formulation?

9 A. It's a formulation of oxycodone,
10 yes.

11 Q. Okay. And there's some
12 additional sales off to the right.
13 Doesn't look like too much, I guess,
14 right? Just a million pills, or 845,000?

15 MR. STERN: Objection to the
16 form.

17 A. 845,000 extended units.

18 Q. Okay. And, so, we also see that
19 branded product that you all sold
20 Opana ER --

21 MR. STERN: Objection.

22 Q. -- close to 500 million units
23 sold in that product, right?

24 MR. STERN: Objection to the

1 form.

2 A. Almost 500 million unit --
3 extended units of Opana ER.

4 Q. Okay. And then Morphine, we
5 talked about that on the -- the product
6 chart earlier today, some 1.1 billion
7 units of Morphine, right?

8 A. 1.1 billion extended units, yes.

9 Q. Okay. So, look, we don't have
10 to go through each of these line items to
11 get them into the record, but it's some
12 8.2 billion extended units over the period
13 of time that we received data from Endo
14 for, correct?

15 A. Yes, that's what it says.

16 MR. BUCHANAN: Okay. Could I
17 have the chart, please, for Qualitest?

18 BY MR. BUCHANAN:

19 Q. We looked at that kind of
20 corporate history chart earlier today,
21 sir, and saw that in 2010, Endo acquired
22 either Qualitest, or the assets of
23 Qualitest.

24 Do you recall that?

1 A. Yes.

2 Q. Okay. That was roughly 2010, I
3 believe, when that happened.

4 (Campanelli Exhibit 208,
5 document, was marked for
6 identification, as of this date.)

7 BY MR. BUCHANAN:

8 Q. I'm going to pass you Exhibit
9 208.

10 A. Are we done with this document?

11 Q. For the moment, yes. You can
12 keep them close, but we don't know when
13 we'll need to refer to them.

14 A similar chart, sir, in Exhibit
15 208 to what we looked at for Endo just a
16 moment ago.

17 As we talked about, Qualitest
18 was in the business of making opioid
19 products, right?

20 MR. STERN: Objection; lack of
21 foundation.

22 A. Qualitest manufactured opioids,
23 yes.

24 Q. Okay. Manufactured a lot of

1 them, right?

2 A. It shows 24 billion unit --
3 extended units.

4 Q. Let's pause on that.
5 24 billion?

6 A. Yes.

7 Q. So, if we look at this chart,
8 sir, we see, boy, making a lot of Vicodin,
9 right?

10 MR. STERN: Object to the form.

11 A. Could you show me what product
12 you're referring to?

13 Q. I'm referring to hydrocodone
14 APAP.

15 Do you see that?

16 A. Yes.

17 Q. 18 billion pills.

18 You see that, sir?

19 A. I see it.

20 Q. That's a lot of Vicodin.

21 MR. STERN: Object to the form.

22 A. It's -- it's -- it's significant
23 volume.

24 Q. Market leader in Vicodin?

1 MR. STERN: Object to the form.

2 A. That, I don't know.

3 Q. Okay. Let's look down to -- and
4 there's other hydrocodone products there,
5 sir, and the jury will obviously have this
6 evidence. But I -- I would like to call a
7 few things out.

8 If we could, go down to it looks
9 like Qualitest was also making Endocet,
10 correct?

11 A. Correct.

12 Q. Do you recall, sir, that after
13 Par -- excuse me. Qualitest was acquired
14 by Endo, the generic operations of Endo
15 kind of moved into Qualitest operations?

16 MR. STERN: Object to the form.

17 A. I'm sorry. Could you say that
18 one more time?

19 Q. Yeah.

20 Do you recall, sir, that after
21 Endo acquired Qualitest in 2010, some of
22 the generic portfolio of Endo moved into
23 the operating business of Qualitest? Do
24 you recall that?

1 A. I -- I don't know if that
2 happened in 2010.

3 Q. Okay.

4 MR. BUCHANAN: Can we scroll,
5 Corey, to just see the years from 2010
6 to -- no, actually, if you could kind
7 of just pull the right one over so we
8 could see 2010.

9 Q. So, okay. These are the -- this
10 is product mix. We see Endocets start to
11 be made by Qualitest in 2011.

12 You see that?

13 A. I see that.

14 Q. Okay. Hundred million pills
15 that year, 358 million the next year, 170
16 million the year after that, and it
17 continues.

18 MR. BUCHANAN: Could you go to
19 the right, Corey?

20 Q. For a total of some 880 million
21 Endocets, right?

22 A. I see that, yes.

23 Q. And we've also got Qualitest
24 making Percocet, right?

1 A. Yes.

2 Q. 87 million Percocets made?

3 A. Yes. Qualitest is manufacturing
4 on behalf of Endo at this time.

5 Q. Okay. So, yeah, after -- after
6 the time of the merger, some of the pills
7 that used to be made or contracted for by
8 Endo are now being made or contracted for
9 by Qualitest, right?

10 A. Yes.

11 I'm sorry. You said 2010. I
12 just think it's more like 2011, but yes.

13 Q. And that's just a matter of when
14 the operations get formally integrated,
15 right?

16 A. Seems reasonable.

17 Q. Okay. And, so, let's total this
18 up. So -- actually, before we do that,
19 there's also this other line item for
20 oxycodone APAP.

21 Do you see that?

22 A. Yes.

23 Q. Oxycodone APAP, that would be
24 another way of referring to Percocet,

1 right?

2 A. Yes.

3 Q. Okay. You got Percocet in,
4 essentially, three different buckets at
5 least, right?

6 A. There's a generic form in here.

7 Q. And that would be the oxycodone
8 APAP?

9 A. Correct.

10 Q. Okay. And, so, what we see
11 here, sir, is Qualitest, prior to the time
12 of its acquisition and after the time of
13 its acquisition, pushing out a lot of
14 opioid pills, right?

15 MR. STERN: Object to the form.

16 A. I see the volume here on the
17 paper.

18 Q. 25 billion, right?

19 A. 25 billion extended units, yes.

20 Q. And we can agree that's a lot,
21 right?

22 A. It's a high volume of -- of
23 opioids, or controlled substances.

24 Q. I mean, that's -- that's enough

1 for a hundred count bottle for every adult
2 in the United States, right?

3 A. This is over a 15-year period.

4 Q. The answer to my question
5 though, sir, would be yes, that is enough
6 for a hundred count bottle hydrocodone,
7 oxycodone, oxymorphone, collection of
8 opioid pills manufactured by Qualitest for
9 every adult in the United States, correct?

10 MR. STERN: Objection to the
11 form.

12 A. I don't -- I don't know the
13 answer to that.

14 Q. The answer is you just don't
15 know the population of adults in the
16 United States?

17 A. That's correct.

18 Q. Okay. Does it surprise you that
19 Qualitest made that many opioids?

20 MR. STERN: Object to the form.

21 BY MR. BUCHANAN:

22 Q. I just want to -- are you -- are
23 you learning this sitting here today, or
24 did you have that awareness before you

1 came in today?

2 A. I did not have the specific
3 volume, but it's not surprising that
4 Qualitest had historically been known as
5 an opioid producer. So that -- that --
6 that's -- that's factual. That's known in
7 the industry.

8 Q. Let's look at the bottom, if we
9 could, sir.

10 MR. STERN: I'm sorry, the
11 bottom -- are we still on?

12 MR. BUCHANAN: We're still on
13 this exhibit.

14 MR. STERN: 208.

15 MR. BUCHANAN: Thank you.

16 Exhibit 208.

17 BY MR. BUCHANAN:

18 Q. The screen may or may not be
19 easier. I think probably your -- you can
20 probably read it just fine if you look on
21 the exhibit itself.

22 But, we see, I mean, Qualitest
23 volume of opioids grew quite dramatically.

24 MR. STERN: Objection to the

1 form.

2 BY MR. BUCHANAN:

3 Q. True?

4 A. The generic versions of what
5 they were producing increased.

6 Q. And, so, we look at the counts
7 and we go back to 2001. In fairness, sir,
8 I don't know if that's a full 2001 year's
9 worth of data. This is everything that we
10 were given.

11 2001 reports 162, 162 million
12 pills. I'd suggest probably the better
13 reference point would be 2002.

14 Would you agree with me?

15 A. I would agree with that.

16 Q. Okay. Probably didn't multiply
17 it by five time in one year, right?

18 A. Unlikely.

19 Q. So, in 2002, we see Qualitest
20 made some 721 million opioid pills, right,
21 or other extended units?

22 A. Yes, I see that.

23 Q. 2003 it's grown 846 million,
24 right?

1 A. Yes.

2 Q. Growing in 2004 984 million,
3 right?

4 A. Yes.

5 Q. Growing in 2005 1.2 billion
6 pills, right?

7 A. Yes.

8 Q. Had a little dip in 2006 it
9 looks like, right?

10 A. Agreed.

11 Q. 997 million. A little flat
12 there in 2007 at 1.03 billion.

13 You see that?

14 A. I see it.

15 Q. A billion in 2008. And then
16 2009 growing again.

17 Right?

18 A. I see it.

19 Q. Okay. 1.3 billion pills in
20 2009?

21 A. Correct.

22 Q. One year, right?

23 A. Yes.

24 Q. 1.6 billion in 2010.

1 True?

2 A. Yes.

3 Q. 2.4 billion in 2011, right?

4 A. Yes.

5 Q. 2011 is the year we saw that CDC
6 report about there being an epidemic,
7 right?

8 A. Yes.

9 Q. 3.3 billion, still rising, in
10 2012, right?

11 A. Yes.

12 Q. 2013 we're up to 2.9 billion,
13 correct?

14 A. Correct.

15 Q. And then 3.7 billion in 2014,
16 right?

17 A. Yes.

18 Q. And then in 2015 it's down to
19 2.5 billion, I see, right?

20 A. Right.

21 MR. STERN: Mr. Buchanan, if I
22 may. Ultimately this exhibit will
23 speak for itself.

24 I'd just like to note that we're

1 not being entirely precise with these
2 numbers.

3 MR. BUCHANAN: I appreciate
4 that.

5 BY MR. BUCHANAN:

6 Q. And you can agree, sir, you and
7 I have both been doing a little rounding
8 in our dialogue.

9 Fair?

10 A. Agreed.

11 MR. BUCHANAN: The numbers are
12 on the sheet, and I don't think either
13 side is going to fuss with whatever
14 the data shows is the data.

15 Correct, counsel?

16 MR. STERN: Yes.

17 MR. BUCHANAN: And I'd be to
18 happy to get a stipulation from
19 counsel and put the precise numbers on
20 so we don't have any fuss about that,
21 but that's not an issue for today.

22 BY MR. BUCHANAN:

23 Q. All right. Sir, let's look at
24 the next one.

1 All right. I should indicate in
2 2015, is that the year when Par and
3 Endo/Qualitest came together?

4 A. Yes.

5 Q. And there was some realignment
6 of products among the various portfolio
7 companies beginning in 2015?

8 A. The portfolio were evaluated and
9 we started to synergize products.

10 Q. Okay. And would it be fair to
11 say, sir, that some of the loss in volume
12 between 2014 and 2015 is accounted for by
13 the reallocation of products between Endo,
14 Qualitest and Par as part of that merger
15 process?

16 MR. STERN: Objection; lack of
17 foundation.

18 A. Could you say that one more time
19 for me, sir?

20 Q. Sure.

21 Would it be fair to say, sir,
22 that some of the loss in volume between
23 2014 and 2015 as reflected on the sales
24 for Qualitest, in terms of extended units,

1 is accounted for by the reallocation of
2 products between Qualitest and Endo or
3 Par, or don't you know?

4 A. I don't believe there was a
5 reallocation of products between the
6 portfolios, no. There was not.

7 Q. When did that begin?

8 A. Maybe you can just help me.
9 What do you mean by reallocation?

10 Q. Certain products were deemed to
11 be Qualitest products versus Par products
12 or vice versa, or Endo or Qualitest
13 products or Par products or vice versa, as
14 part of the integration of the companies
15 that began in 2015.

16 Correct?

17 A. I just want to make sure that
18 I'm understanding your question. Is
19 that -- is that your rationale for the
20 decline in -- in volume?

21 Q. I'm just asking you whether that
22 happened.

23 A. Fair enough.

24 The portfolios were combined.

1 The Par and the -- the Par and the
2 Qualitest portfolios were combined.

3 Q. Okay. Well, let's take a look
4 now at the Par sheet. You can set that
5 one aside.

6 MR. BUCHANAN: Could I have,
7 please, Exhibit 207?

8 (Campanelli Exhibit 207,
9 document, was marked for
10 identification, as of this date.)

11 BY MR. BUCHANAN:

12 Q. I saw kind of a smile in
13 recognition when you looked at 207, sir.

14 Do you see that's what happened
15 by looking at the Par data? That, in
16 fact, some products that were not Par
17 products were now kind of on the Par side
18 of the ledger?

19 A. Agreed.

20 Q. Okay.

21 MR. BUCHANAN: Let's pull up,
22 please, E1809, Corey.

23 BY MR. BUCHANAN:

24 Q. All right. We have it on the

1 screen here. This is a spreadsheet that's
2 been generated by us in response to
3 information provided to us by your
4 company, or at least by counsel for the
5 company. And on the left-hand side, like
6 the other charts, it lists the various
7 products that had been kind of on Par's
8 ledger over the years as orders shipped or
9 manufactured by the company.

10 Do you recognize those products,
11 sir? Let's look prior to 2015. Do you
12 recognize those products for which there
13 is shipment data as products that Par was
14 selling during that period of time?

15 A. Yes.

16 Q. Okay. And, so, we see that the
17 company is selling, just for simplicity,
18 sir, we'll look at the pre-2015 period of
19 time just to get a sense of really what
20 the company was doing, okay.

21 Would that be fair?

22 A. Yes.

23 Q. Okay. So, if we look at 2014,
24 for example, this would be some two, three

1 years after the CDC had stated there's an
2 epidemic of prescription drug --
3 prescription drug overdose in this
4 country.

5 Do you see the products that Par
6 was selling that year?

7 A. Yes.

8 Q. What products was Par selling?

9 A. Chlorpheniramine, hydrocodone,
10 which is Tussionex. It sold the -- the
11 fentanyl patch. It sold -- I apologize.
12 I went out of order here. It sold the
13 fentanyl lozenge, again the fentanyl
14 patch. It sold Morphine extended-release
15 tablets. It sold an authorized generic
16 version of oxycodone and it sold oxycodone
17 in combination with acetaminophen.

18 Q. Okay. And, so, just to drill
19 down on that a little. I mean, those
20 are -- the names you just read correlate
21 with the pictures we were looking at on
22 that demonstrative earlier today, on that
23 slide?

24 A. The Par portfolio?

1 Q. Yes.

2 A. Correct.

3 Q. Okay. I just want to make sure
4 that we fairly characterize the Par
5 portfolio.

6 So, in 2014, sir, Par, for the
7 first year in its history, enters the
8 opioid market with Percocet, right?

9 A. With the oxycodone APAP generic
10 product you're referring to?

11 Q. That's what I was referring to.
12 And Corey was kind enough to highlight the
13 actual word I spoke, which is fair.

14 A. Okay.

15 Q. But I was looking at the
16 oxycodone APAP, that would be the generic
17 equivalent of Percocet, correct?

18 A. Correct.

19 Q. You all sold 270 million
20 Percocets that year?

21 A. Correct.

22 Q. One for every person in the
23 United States, or close to it?

24 A. Approximately.

1 Q. So about 400 million units that
2 year of opioid-containing products, right?

3 A. Correct.

4 Q. And as we look forward, sir, we
5 see some 7.7 billion products before and
6 after the merger with Endo attributable to
7 Par, correct?

8 A. Yes. With a decrease in the out
9 years, correct.

10 Q. I think I said products, but
11 more correctly would have said extended
12 units, pills, dosing units, et cetera.

13 Is that fair?

14 A. Thank you. Yes.

15 Q. Okay. These products that we're
16 talking about, sir, oxycodone APAP
17 hydrocodone, Morphine, these are products
18 that were called out as in the CDC's note
19 from 2011, as part of the prescription
20 drug epidemic.

21 Fair?

22 A. That's what the documents refer
23 to, yes.

24 Q. Okay. What I'd like to do, sir,

1 is just kind of, so we can visualize this
2 a little bit.

3 (Pause.)

4 We're going to have one for you
5 as well.

6 MR. BUCHANAN: This is going to
7 be Exhibit 210.

8 (Campanelli Exhibit 210,
9 document, was marked for
10 identification, as of this date.)

11 BY MR. BUCHANAN:

12 Q. All right. So, I'll represent
13 to you, sir, that what we've done, and you
14 can see the source is listed on the
15 bottom, is we've plotted the -- the sales
16 of pills in pills, not dollars, okay.
17 This is the pill volume shipped by the
18 three current Endo entities, Endo,
19 Qualitest and Par.

20 Do you see that?

21 MR. STERN: Objection; lack of
22 foundation.

23 A. Yes.

24 Q. Okay. We can see, sir, that

1 in -- the merger, obviously, with
2 Qualitest happens in 2010, correct?

3 A. Endo and Qualitest occurred in
4 2010, yes.

5 Q. And the merger with Par occurred
6 in 2015, correct?

7 A. Correct.

8 Q. What we've included, sir, so
9 this chart is reflective of the sales of
10 these entities for whatever you've given
11 us data for, is the sales that even
12 preceded those mergers, okay.

13 MR. STERN: Objection to the
14 form.

15 BY MR. BUCHANAN:

16 Q. Just so we're communicating,
17 okay?

18 A. These represent the extended
19 units, correct.

20 Q. Okay. So, what we see, sir,
21 over time in the left-hand column is
22 extended units. There's a legend there,
23 just so we're communicating with each
24 other, and a legend on the bottom that

1 says extended units are pills or dosage
2 units, et cetera, okay.

3 Is that the way you report
4 things in terms of shipments in your
5 business, sir?

6 A. I'm sorry?

7 Q. Do you report extended units in
8 the pharmaceutical business?

9 A. Probably units.

10 Q. Units would be bottles?

11 A. Correct.

12 Q. Have you seen the reports that
13 also calculate the extended units?

14 A. Yes.

15 Q. Okay. So it's a fair way to
16 report, if you will, the volume for a
17 product. Fair?

18 A. It's my understanding.

19 Q. Okay. So, we have here extended
20 units over the years, and we can see that,
21 you know, Endo, not -- we don't have data
22 prior to '99 and maybe not even a full
23 year for '99, but Endo at its early stage
24 is less than a billion pills, half a

1 billion it looks like while it's getting
2 started. You know, the yellow lines grow
3 and I guess kind of approach a billion in
4 maybe 700, 800 million in 2009.

5 You see that?

6 A. Yes.

7 Q. And then after 2010 there's some
8 reallocation of products between Endo and
9 Qualitest in terms of their relative,
10 which company's responsible for that.

11 Do you understand that, sir?

12 A. In 2010 it appears that
13 there's -- Qualitest is producing generic
14 versions of Endo's products and that's
15 why, I assume, it's increasing from
16 Qualitest.

17 Q. You see that Endo's attribution
18 declines over time while Qualitest's go
19 up, right?

20 A. Correct.

21 Q. And, is that something like what
22 happened with Par and Qualitest in 2015, a
23 reallocation of products between the two
24 companies?

1 A. That's what appears to be
2 happening, yes.

3 Q. We see, obviously, the sales for
4 Par in 2014, 2015, and they shift fairly
5 dramatically between Par and Qualitest,
6 right?

7 A. Yes.

8 Q. Okay. So, reorienting us.

9 In 2011, we looked at that CDC
10 note talking about the epidemic
11 prescription drugs and overdoses.

12 We can see that the Endo,
13 Qualitest and Par entities are growing
14 business, right?

15 MR. STERN: Mr. Buchanan, just
16 for the record, object to this
17 demonstrative to the extent it makes
18 it appear as though certain entities
19 were unified at times when they were
20 not. The earlier testimony elaborated
21 the corporate history and we'd
22 respectfully submit that this
23 demonstrative is potentially
24 misleading on that point.

1 identified?

2 MS. SCULLION: They e-mail in.

3 MR. BUCHANAN: We can get names
4 at the break.

5 MR. STERN: I wasn't aware of
6 that. That answers my question.

7 BY MR. BUCHANAN:

8 Q. You have it before you again,
9 sir?

10 A. I do.

11 Q. I think if you go to the second
12 page you'll see the DEA release: Drugs of
13 chemical concern. Action plan to prevent
14 the diversion and abuse of OxyContin.

15 You see that?

16 A. I see it.

17 Q. There was also a GAO report in
18 2003.

19 You know that?

20 A. I see it.

21 Q. A GAO report.

22 Are you aware of that?

23 A. I'm not aware of the report.

24 Q. Okay. If you go to Exhibit 44

1 in your other binder, if we can keep them
2 both --

3 A. Sure.

4 Q. -- reasonably handy.

5 MR. STERN: Mine only goes up to
6 40.

7 New binder. New binder, Paul.
8 No, it's not in there.

9 THE WITNESS: Okay. 44, you
10 said?

11 MR. BUCHANAN: Exhibit 44.

12 (Campanelli Exhibit 44,
13 document, was marked for
14 identification, as of this date.)

15 BY MR. BUCHANAN:

16 Q. Do you know what the GAO is,
17 first of all?

18 A. Government -- government
19 accounting -- accountability --
20 government -- I -- no, I -- general
21 accounting office. I don't know.

22 Q. Okay. You know it's a -- it's
23 an office within the government that
24 periodically conducts investigations and

1 reports to Congress and others, correct?

2 A. Correct.

3 Q. So, in December of 2003, sir,
4 they issue a report: Prescription drugs
5 OxyContin abuse and diversion and efforts
6 to address the problem.

7 Do you see that, sir?

8 A. I see it.

9 Q. Okay. And you all, Endo to be
10 clear, decide, at this point in time,
11 after a market that is built on
12 overaggressive promotion, that has
13 embedded within it diversion and abuse,
14 that this is a market you want to be in,
15 right?

16 MR. STERN: Objection to the
17 form of the question; lack of
18 foundation.

19 A. Endo is -- is -- is -- is -- is
20 marketing and promoting opioids into --
21 into this category -- into the U.S. at
22 this point in time.

23 Q. Well, no. I mean even more
24 specifically, sir.

1 I mean you wanted to start
2 selling OxyContin, generic OxyContin, at
3 this point in time in the end of 2003,
4 after allegations of fraud and
5 manipulative marketing, that's the market
6 you wanted to get into and the product you
7 wanted sell, correct?

8 MR. STERN: Objection to form
9 and foundation.

10 A. Endo was looking to get into the
11 market.

12 Q. Right. And Endo did get into
13 the market, right?

14 A. Over time.

15 Q. It got into the market and made
16 generic oxycodone -- excuse me. Generic
17 OxyContin, correct, sir?

18 MR. STERN: Objection to form
19 and foundation for 2004.

20 A. Endo produced the product.

21 Q. Let's look. Can we pull out,
22 please, the Endo sales chart that we had
23 this morning?

24 MR. BUCHANAN: Corey, maybe just

1 for the witness and all of us, we
2 could pull it up on the screen, it's
3 E1811.

4 BY MR. BUCHANAN:

5 Q. We see oxycodone ER 2005.

6 Do you see that?

7 MR. BUCHANAN: I'm sorry. Can
8 you blow it up for us, please, Corey?
9 It's kind of hard to see.

10 Maybe just cut it off at 2006.

11 There we go. Can you see it
12 all?

13 That's good. Can you scroll a
14 little more over so we can have 2004,
15 2005, 2006?

16 Great.

17 Q. So, just to reframe this, sir.
18 The DEA issues an alert on OxyContin in
19 2003 about concerns about abuse and
20 diversion, right?

21 A. I see it.

22 Q. The GAO issues a report on
23 OxyContin abuse and the concerns how it
24 was marketed and the representations that

1 were made and what doctors and patients
2 believe, right?

3 A. I don't know what's in this
4 document.

5 Q. Okay. You can see it in the
6 summary on the left.

7 A. I see the title.

8 Q. Okay. And we see little over a
9 year later, Endo's bringing generic oxy to
10 the market, right?

11 MR. STERN: Objection; form and
12 foundation. Other than what's on the
13 face of the document.

14 A. It eventually enters the market.

15 Q. Okay. The eventually is in
16 2005, Endo sells -- brings generic
17 OxyContin to the market, sir, correct?

18 MR. STERN: Objection; form and
19 foundation.

20 A. I see the units in 2005.

21 Q. And you see the units in 2006,
22 right?

23 A. Correct.

24 Q. Some 270 million pills in some

1 period within those two years, right?

2 MR. STERN: Objection; form and
3 foundation.

4 A. Show me where you're looking.

5 Q. I'm looking oxycodone ER.

6 MR. BUCHANAN: Corey, could you
7 line them up a little bit, please?

8 THE WITNESS: You're a little
9 off.

10 MR. BUCHANAN: Yeah, they're a
11 little staggered, but I think you can
12 tell where.

13 A. I see it.

14 Q. So you see for 2005 130 million
15 pills?

16 A. Yes.

17 Q. You see for 2006 148 million
18 pills?

19 A. Yes.

20 Q. Into this market built on
21 fraudulent representations, marketing
22 problems, and diversion and abuse, right?

23 MR. STERN: Objection; form and
24 foundation.

1 A. I see the report that talks
2 about abuse and diversion. And I see that
3 Endo launched the product in 2005 and had
4 sales as well into 2006 and a little bit
5 in 2007.

6 Q. Right. And you know the story a
7 little bit there, sir. That the company
8 got approval from the FDA, the AB generic,
9 to bring it to the market. Then there was
10 a litigation that followed with Purdue.

11 Is that right?

12 MR. STERN: Objection; form and
13 foundation.

14 MS. PARK: Objection.

15 A. I'm actually not familiar with
16 that.

17 Q. You know Purdue litigated with
18 Endo over this. You don't know that?

19 A. No.

20 Q. And shut it down?

21 MR. STERN: Objection.

22 BY MR. BUCHANAN:

23 Q. So they could keep the sales for
24 themselves?

1 MR. STERN: Objection; form and
2 foundation.

3 A. I didn't know the history.

4 Q. Okay. So, 270 million pills by
5 Endo generic oxy in 2005 and 2006. That's
6 what the data shows, right?

7 A. I see it.

8 Q. Okay. Please look at Exhibit 9,
9 sir.

10 (Campanelli Exhibit 9, document,
11 was marked for identification, as of
12 this date.)

13 A. Am I keeping this other binder
14 in front of me, or not?

15 Q. You might need to. I apologize
16 for that, sir. It shouldn't happen too
17 often.

18 This is an article and I guess a
19 financial report. Market Watch.

20 You see that?

21 A. Yes, I see it.

22 MR. BUCHANAN: Can you pull it
23 up, please, Corey? It's E242.

24 And you can take down the

1 numbers.

2 Q. This is from March 24 of 2004.

3 You see that?

4 A. I see it.

5 Q. That's three months after the
6 GAO issues their report about all this
7 problem with OxyContin, right?

8 MR. STERN: Objection; form and
9 foundation.

10 BY MR. BUCHANAN:

11 Q. Do I have the dates right, sir?

12 A. Correct.

13 MR. STERN: Exhibit 9?

14 MR. BUCHANAN: Exhibit 9.

15 MR. STERN: It's missing from my
16 book.

17 It's behind Tab 8. Okay.

18 BY MR. BUCHANAN:

19 Q. It says: Endo wins OxyContin
20 generics bid.

21 Right?

22 A. I see it.

23 Q. Endo wins?

24 A. I see the headline.

1 Q. It says: Endo OxyContin, which
2 was nicknamed hillbilly heroin after
3 rampant abuse was seen in certain rural
4 areas had U.S. sales of about 1.9 billion
5 in 2003.

6 Right?

7 A. I see it.

8 Q. (Reading) We are extremely
9 pleased by the FDA's approval of our
10 oxycodone extended-release product which
11 represents a substantial market
12 opportunity for Endo.

13 A. I see it.

14 Q. Do you see that?

15 (Reading) And reinforces our
16 leadership position in pain management,
17 said the CEO Carol Ammon.

18 Right?

19 A. I see it.

20 Q. Three months after the GAO
21 reports about all these problems with
22 OxyContin.

23 You agree with that, right?

24 A. The timing is understood.

1 Q. After the DEA reported about the
2 problems of abuse and diversion of
3 OxyContin, as well as your other two
4 products, Percocet and Percodan, right?

5 A. Yes.

6 Q. And after Congress held hearings
7 on the way in which OxyContin had been
8 promoted, correct?

9 MR. STERN: Objection; form and
10 foundation.

11 A. Yes.

12 Q. And we saw, sir, later in time
13 as well, that Qualitest also made generic
14 OxyContin, right?

15 A. Yes.

16 Q. And Par made generic OxyContin,
17 right?

18 A. No.

19 Q. Par sold generic OxyContin?

20 A. Yes.

21 Q. Into the market that was built
22 on those representations as described in
23 these reports, right, sir?

24 MR. STERN: Objection to the

1 form and foundation.

2 A. Could you repeat the question?

3 MR. BUCHANAN: Withdrawn.

4 Q. Opana, that's one you sold for
5 longer than a couple years, right?

6 MR. STERN: Objection; form and
7 foundation.

8 A. Opana was sold for a number of
9 years.

10 Q. Okay. Opana, real potent,
11 right?

12 MR. STERN: Objection to form
13 and foundation.

14 BY MR. BUCHANAN:

15 Q. You can answer.

16 A. It's a potent opioid.

17 Q. Three times more potent than
18 Morphine, right?

19 A. On an MME basis.

20 Q. Two times more potent than the
21 drug we were just talking about that had
22 all the concerns about addiction and
23 abuse, OxyContin, right?

24 MR. STERN: Objection to the